| da a | | Application or Docket Number | | | | | |
|---|---------------------|--|----------|-------------------------|--------------|----------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECOR Effective January 1, 2003 | | | | 10 | 619 | k]0 | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | SMAL | ENLILA | OR | OTHER SHALL | 7.5 |
| TOTAL CLAIMS | 13 | | RAT | E FEE | | RATE | (FEE |
| FOR | NUMBER FILED | NUMBER EXTRA | BASIC | FEE 375.0 | OR | Basic Fee | 750.00 |
| TOTAL CHARGEABLE CLAIMS | 3 minus 20= * | | X\$ 9 |)= | OR | X\$18= | |
| INDEPENDENT CLAIMS | (. mlnus 3 = 1 . | | X42 | | OR | X84= | |
| MULTIPLE DEPENDENT CLAIM P | RESENT | | +140 | | OR | | |
| * If the difference in column 1 is | TOT | | OR | بسينا | 40 | | |
| CLAIMS AS AMENDED - PART II OTHER THAN | | | | | | | |
| (Column 1) | (Cott | umn 2) (Column 3 | SMA | LL ENTITY | <u>_</u> .OR | SMALL | ENTITY |
| CLAIMS REMAINING AFTER AMENDMENT Total Total | NUI PREV | MBER PRESENT //OUSLY EXTRA D.FOR | RAT | ADDI E TIONA FEE | | RATE | ADDI- TIONAL PEE |
| Total • O | Minus ** | 0 .4 | X\$ 9 | | OR | X\$18= | |
| E mospandam | Minus *** | | X42 | - | OR | X84= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | _ | OR | +280= | |
| 1 | | | | TAL | -OR | TOTAL | 1 (2) 1 1 (2) |
| ADDIT. FEE ON ADDIT. FEE ON ADDIT. FEE | | | | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Total Total Total Total Total Total Total Total Total | HIG NU PREV | SHEST MBER PRESENT NOUSLY D FOR | RAT | ADDI E TIONA FEE | | RATE | ADDI- TIONAL FEE |
| Total • 17 | Minus ** | 20 /. | x\$ s | - / | ÓЯ | X\$18= | |
| Independent • 2 | Minus *** | 3 • / | X42 | -/ | OR | X84=/ | |
| THIS I PRESENTATION OF MA | טבי ודיב הבגבווותבר | TI CENTRY L | +140 | | OR | 200 | |
| · . · | | | ADDIT. | TAL EE | OR | ADOIT: FEE | 25.35 |
| (Cotumn 1) | | umn 2) (Column 3 | <u> </u> | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Total Total Total Total Total | NU. | MBER PRESENT MOUSLY EXTRA D FOR | RAT | ADDI- E TIONA FEE | | RATE | ADDI- TIONAL FEE |
| Total • | Minus ** | = . | X\$ 9 | | OR | X\$18= | |
| Independent * | Minus *** | e. | X42 | - | OR | X84= | 17.2 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | OR | +280= | · |
| " If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Mumber Provinces Paid For" IN THIS SPACE is less than 20, enter "20," Apper SEE | | | | | | | |
| The Nighest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.* The Nighest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | |

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